PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10628204

CLAIMS AS FILED - PART I								MALL EN			OTHER	
			(Column 1)		(Column 2)		1	TYPE -		OR_	SMALL E	
TOTAL CLAIMS			- Y a					RATE	FEE	L	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	ASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			minus 20=		• 201			X\$ 9=	261	OR	X\$18=	·
INDEPENDENT CLAIMS			minus 3 =		. 9			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM P			RESENT					+140=		OR	+280=	
+ If	the difference in	column 1 is	ess than zer	r "0" in a	olumn 2		TOTAL	636	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Cotumn 2) (Column 3)) _	SMALL	ENTITY	OR	OTHER	
AMENDMENT A		CLAIMS REMAINING AFTER	in Carron and	HIG NUI PREV	HEST HBER HOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total	AMENDMENT	Minus		20	7.	1	X\$ 9=		OR	X\$18=	
AEN	Independent	• 1	Minus	*** (3	=]	X42=		OR	X84=	
M	FIRST PRESEN	ITATION OF M	ULTIPLE DEF	ENDE	IT CLAIM		J	+140=		OR	+280=	
·								TOTAL ADDIT, FEE		OR	TOTA	
				/C-1	umn 2)_	(Column	31	ADDITION EL	•			
 		(Column 1) CLAIMS			HEST	T	፝		ADDI-	1		ADDI-
100		REMAINING AFTER		PRE	MBER VIOUSLY	PRESENT		RATE	TIONAL		RATE	TIONAL FEE
AMENDMENT	Total	AMENDMENT	Minus	***	ID FOR	=	7	X\$ 9=		OF	X\$18=	
	Independent	•	Minus	***		-	╗	X42=		OF	X84=	
\{	FIRST PRESE	NTATION OF I	VIULTIPLE DE	PENDE	NT CLAIR	A 🔲	\Box	-	1	┫~		-
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								+140=	<u> </u>	OF		
								ADDIT. FE		OF	ADDIT. FI	
(Column 1) (Column 2) (Column 3)												
		CLAIMS REMAINING AFTER AMENDMEN		H N PRI	IGHEST UMBER EVIOUSLY AID FOR	PRESEN		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
	Total	AMENDMEN	Minus			-		X\$ 9=		. 0	R X\$18	- _
Manager	Independent		Minus			a		X42=	1	٦,	R X84	
E	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									٦,		=
		home 4 in large the	on the entry lis c	ntumn 2.	write "O" in	column 3.		+140:			10	TAL
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **Of the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column.											ALIDIT.	7E E L
1	THE MEDICAL WILL	M: 1041000)	, ,									OF COMME